### DEPARTMENT OF LOCAL GOVERNMENT FINANCE LOCAL GOVERNMENT TAX CONTROL BOARD HEARING INFORMATION SHEET

# TOWNSHIP EMERGENCY LOAN (IC 36-6-6-14)

TO	TOWNSHIP:	COUNTY:
retu		edite review of your request. Incomplete submissions will be petition the Department of Local Government Finance for bry requirements for this request.
		<u>GENERAL</u>
1.	This loan request is for (check one):	
	<b>∠ E</b> ownship Amo	unt:
		unt:
	Æ Æ re Amo	unt:
2.	2. Described the emergency:	
3.	3. On what date did the Township Board resolve tha	t it would be necessary to incur debt?
4.	4. How can the need for emergency loans be avoided	ed in the future?
	<u>TERM</u>	S OF THE LOAN
1.	1. State the maximum number of years for repa	ayment approved by the Township Board years
2.	2. How many banks were contacted for interest	quotes:
3.	<ol> <li>State the interest rate that is anticipated to b</li> </ol>	e charged:

## TAX RATE

1.	Is a tax rate anticipated to repay the debt? (Y) (N)				
2.	In what taxing year will taxes first be levied for rep	20 Pay 20			
3.	Statutory Debt Limit:				
	Current Year Assessed Valuation \$	/3 X (.02) = \$			
	? Civil Assessed Valuation	? Fire Asse	essed Valuation		
4.	Indicate the anticipated tax rate by completing the	below information			
	a) First Year of Repayment requiring rate:	20Pay 20	_		
	b) Estimated Assessed Value	\$			
	c) Annual Payment	\$			
	d) Less Estimated Excise Tax	\$			
	e) Less Estimated Financial Institutions Tax	\$			
	f) Estimated Levy (c-d-e)	\$			
	g) Estimate Tax Rate (f ÷ b/100)		(to 4 decimal places)		
	* If the request is for fire protection purpos es use the ce	rtified fire assessed valuation, oth	nerwise, use the unit civil assessed valuation		
5.	If no tax rate impact is anticipated due to increased assessed valuation and/or debt retirement provide a schedule indicating the unit's estimates for the term of the loan.				
6.	Prior to the determination by the Township Board to enter into this debt, was this issue and anticipated tax rate openly discussed at a public hearing?				
	[ ] Yes	[ ] No			
7.	Attach any brochures or newspaper articles regard	ding this debt.			

# Current Debt Service (Indicate <u>all</u> outstanding Debt Service)

Purpose	Annual Payment	Retirement Date
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Attach additional sheets as necessary

## Financial Data

Fund	DLGF Approved Tax Rate*	DLGF Approved Tax Levy*	Approved Appropriations*	January 1, 2002 Cash Balance*	Encumbrances Carried Forward from 2001
General	\$	\$	\$	\$	\$
Poor Relief	\$	\$	\$	\$	\$
Fire	\$	\$	\$	\$	\$
Cumulative Fire	\$	\$	\$	\$	\$
Debt Service	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$
	\$	\$	\$	\$	\$

\*Information must indicate those amounts approved by the Department of Local Government Finance

# History of Emergency Loans (For the past five (5) year period, indicate the amount of Emergency Loans approved)

Year	Amount	Purpose
1997	\$	
1998	\$	
1999	\$	
2000	\$	
2001	\$	

**Emergency Loans for Fire Protection** (Complete this section only if the emergency is for fire protection)

1. If the emergency is for contractual purposes, was the establishment of a Fire Protection District or considered as an alternative method to providing fire protection to the township?					ritory
	[ ] Yes	S [	] No		
2.	If fire protection is provided by wholly or pa	rtially by Volu	nteer departments, com	plete the following:	
	Department Name	Curre	nt Contract Amount	Last Year Contract A	mount
	·	\$		\$	
		\$		\$	
		\$		\$	
3.	Department Personnel (Type and Number)				
	Type		Current Year #	Last Year #	]
	Full-time Firefighters				]
	Volunteers				]
4.	Is the emergency based upon the Township	o's inability to	fund full-time firefighter	s personal services budge	ť?
	[ ] Yes	[	] No		
		f Yes, complete t			
(a)	Current year DLGF approved Personal Ser		ne ronownig)	\$	
` '					
(b)	Last year Personal Services appropriations		onai appropriations)	\$	
(c)	Amount <u>adopted</u> by Fiscal Body for current	year		\$	
(d)	What percent salary increase did the Fiscal Body approve?			%	
5.	Has the Township applied for a firefighting	services appe	al within the last three (	3) years? (Y) (N)	
	a) If so, was the appeal grante	d? (Y) (N)			
	b) Appeal Amount:				

### **Required Documentation**

The following information is required to be attached to this document

This document and supporting information must be filed with the Department of Local Government Finance on or

before the "Information Due Date" as indicated below

### Indicate by a [?] documentation attached

Resolution or Special Order of the Township Board authorizing the debt				
Proofs of publication of the Public Hearing				
Proofs of publication of Notice of Determination to Taxpayers to Incur a Debt				
County Auditor's Certificate of No Remonstrance				
Amortization Schedule for term of debt indicating semi-annual payments				
Ten (10) copies of Hearing Information Sheet and above supporting documentation				
Nation				
Notice  To obtain a debt service rate for the ensuing budget year, the unit must comply with the provisions of IC 6-1.1- 17-3 for the ensuing year budget. In addition, on or before December 31 of the current year, the unit must execute the debt and file with the Department of Local Government Finance a final amortization schedule.				
Certification				
I certify to the best of my knowledge and belief that the above is a full, true and complete disclosure for the proposed project(s) to be presented to the Local Government Tax Control Board and Department of Local Government Finance.				
Dated this day of, 20				
Signature				

Title

## LISTING OF PROFESSIONALS INVOLVED IN THIS PROJECT

(The Dept. of Local Government Finance Order will only be provided those as indicated below)				
Attorney				
Name				
Address				
Phone Number				
Fax Number			-	
Date of Written Contract				
Is Fee Percentage Based	[ ] Yes	[ ] No		
Provide Copy of DLGF Order	[ ] Yes	[ ] No		
17		1	⊒	
		Bond C	ounsel	
Name				
Address				
Phone Number				
Fax Number				
Date of Written Contract				
Is Fee Percentage Based	[ ] Yes	[ ] No		
Provide Copy of DLGF Order	[ ] Yes	[ ] No		
		Financial	Advisor	
Name		Financia	Auvisor	
Address				
Phone Number				
Fax Number			_	
Date of Written Contract			_	
Is Fee Percentage Based	[ ] Yes	[ ]No	-	
Provide Copy of DLGF Order	[ ] Yes	[ ]No	_	
Trovido dopy di Bedi Gradi	[ ] 103	[ ].10	<b>⊣</b>	
		Arch	itect	
Name				
Address				
Phone Number				
Fax Number				
Date of Written Contract				
Is Fee Percentage Based	[ ] Yes	[ ] No		
Provide Copy of DLGF Order	[ ] Yes	[ ] No		
		Unit Fisc	ol Officer	
Name		CHIL FISC	ii Officei	
Address				
Phone Number				
Fax Number			7	
Date of Written Contract			=	
Is Fee Percentage Based	[ ] Yes	[ ] No	=	
Provide Copy of DLGF Order	[ ] Yes	[ ]No	-	
1.3			_	
		Otl	ner	
Name				
Address				
Phone Number				
Fax Number				
Data of Writton Contract	1			
Date of Written Contract				
Is Fee Percentage Based Provide Copy of DLGF Order	[ ] Yes	[ ] No		

## 2002 Local Government Tax Control Board Meeting Dates

Petitions Due	Information Due	Meeting Date	Location
NO JANUARY LOCAL	GOVERNMENT TAX	CONTROL BOARD	MEETING
January 28, 2002	February 8, 2002	Feb. 28, 2002	Conf. Ctr. Room 1
February 25, 2002	March 8, 2002	Mar. 28, 2002	Conf. Ctr. Room 1
March 25, 2002	April 5, 2002	Apr. 25, 2002	Conf. Ctr. Room 1
April 22, 2002	May 3, 2002	May 23, 2002	Conf. Ctr. Room 1
May 27, 2002	June 7, 2002	June 27, 2002	Conf. Ctr. Room 1
June 24, 2002	July 5, 2002	July 25, 2002	Conf. Ctr. Room 1
July 22, 2002	Aug. 2, 2002	Aug. 22, 2002	Conf. Ctr. Room 1
Aug. 26, 2002	Sept. 6, 2002	Sept. 26, 2002	Conf. Ctr. Room 1
Reserved for Appeals		Oct. 10, 2002	Conf. Ctr. Room 5
Sept. 23, 2002	Oct. 4, 2002	Oct. 24, 2002	Conf. Ctr. Room 1
Reserved for Appeals		Nov. 14, 2002	Conf. Ctr. Room 4
Oct. 28, 2002	Nov. 6, 2002	Nov. 26, 2002	Conf. Ctr. Room 1
Nov. 11, 2002	Nov. 22, 2002	Dec. 12, 2002	Conf. Ctr. Room 1